



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 3449

<b>SERIAL NUMBER</b> 09/845,739	<b>FILING DATE</b> 04/30/2001 <b>RULE</b>	<b>CLASS</b> 436	<b>GROUP ART UNIT</b> 1743 1641	<b>ATTORNEY DOCKET NO.</b> 2132.044
<b>APPLICANTS</b> George Jackowski, Kettleby, CANADA; Brad Thatcher, Toronto, CANADA; John Marshall, Toronto, CANADA; Jason Yantha, Toronto, CANADA; Tammy Vrees, Oakville, CANADA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 08/29/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 35
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Quia. J. Cook</i> Initials: <i>LVC</i>		<b>INDEPENDENT CLAIMS</b> 6		
<b>ADDRESS</b> Michael A. Slavin McHale & Slavin, P.A. 4440 PGA Blvd., Suite 402 Palm Beach Gardens, FL 33410				
<b>TITLE</b> Biopolymer marker indicative of disease state having a molecular weight of 1793 daltons				
<b>FILING FEE RECEIVED</b> 675	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 08/29/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CANADA	2	35	6
Examiner's Signature _____ Initials _____					

## ADDRESS

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MCHALE &amp; SLAVIN

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SUITE 402

PALM BEACH GARDENS , FL

33410

## TITLE

Biopolymer marker indicative of disease state having a molecular weight of 1793 daltons

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